Systems Guide

For
Health Benefits
Administrators

Prepared By
The Office of Health Benefits
Department of Human Resource Management

http://web1.dhrm.virginia.gov/itech/files/BESvolume1.pdf

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GENERAL INFORMATION:

Health Benefits Systems	
Benefits Eligibility System (BES):	The Benefits Eligibility System (BES) was developed in 1988 and is a subsystem of the online transaction-based Personnel Management Information System (PMIS). The Department of Human Resource Management (DHRM), Office of Health Benefits (OHB) manages BES. OHB and Benefits Administrators across the Commonwealth use the system to determine eligibility, enroll, and make changes for employees, retirees, and extended coverage beneficiaries in the State Health Benefits Program. The BES database contains participant and dependent records. Generally, a participant is an employee or retiree of the Commonwealth of Virginia, and a dependent is a covered family member of a participant. The primary identifier is a 7- digit, system assigned identification number. Records may also be accessed by the social security number or participant's name. Histories of all actions since 1992 that impact a BES record are stored in the BES database. BES records are accessed with a screen call-up command. Screen call-up commands begin with a transaction code, and may include a combination of record-specific fields such as identification number, agency number, or reason code. Some screen call-up commands will only display information, while others permit changes to a BES record. When a call-up command is transmitted, BES validates it against pre-defined business rules and promptly reports back to the user the success or failure of the action. Privileges to use BES may be requested through the DHRM Help Desk on the Internet at http://web1.dhrm.virginia.gov/itech.
EmployeeDirect:	EmployeeDirect is a secure, web-based, do-it-yourself service implemented in 2002 for State employees, State retirees and State Extended Coverage participants. It is quick, easy, and available 24 hours a day from any computer with Internet access and has earned a 98% overall satisfaction rating with users. EmployeeDirect permits review and changes to health benefits, flexible reimbursement accounts, and personal information. It eliminates the paper enrollment form and automatically updates BES. EmployeeDirect confirms requests for changes one of two ways: • Approved right away with a confirmation number, or • Pended for the approval of a Benefits Administrator. Using EmployeeDirect saves time and improves efficiency and productivity - it only takes minutes and saves the State approximately $21 per election.
Reports And Vendor Files:	At night the BES batch processes sort and distribute the day's successful transactions. Turn-around documents are created for agencies and data files for health benefits partners that include the health insurance vendors and the Department of Accounts (DOA). BES produces additional reports and data files at regular, scheduled times. The primary distribution method for BES reports and data files is through the File Transfer Protocol (FTP) folder process, a part of the DHRM "HuRMan File Repository".

HELP:

		Where To Get Additional Help		
		Internet Address	**Phone Number**	**Contact**
Agency Request For Assistance Form:		www.dhrm.virginia.gov/resources/benefitsadmin/RequestForAssistanceForm.pdf	Fax: (804) 371-0231	Employee Services or Systems Team
BES:	Active Employees	herb.boyd@dhrm.virginia.gov	(804) 371-6062	Herb Boyd
	Active Employees & Extended Coverage Participants	teresa.fleming@dhrm.virginia.gov	(804) 371-6465	Teresa Fleming
	Retirees & Long Term Disability Participants:	linda.walton@dhrm.virginia.gov	(804) 371-6463	Linda Walton
DHRM Help Desk:		http://web1.dhrm.virginia.gov/itech	(804) 225-2133	Lona Pugh
DHRM Web Site:		www.dhrm.virginia.gov		
	Benefits Page	www.dhrm.virginia.gov/compandbenefits.html		
	ITECH Page	http://web1.dhrm.virginia.gov/itech		
	Resources for Benefits Administrators Page	www.dhrm.virginia.gov/resources/benefitsadmin/benefitsadmintoc.html		
EmployeeDirect:	Active Employees & Extended Coverage Participants	teresa.fleming@dhrm.virginia.gov	(804) 371-6465	Teresa Fleming
	Retirees & Long Term Disability Participants	linda.walton@dhrm.virginia.gov	(804) 371-6463	Linda Walton
Office Of Health Benefits:		hbp@dhrm.virginia.gov	(804) 371-6436	Deborah Lawrence

REFERENCE CHARTS:

Frequently Used BES Codes		
Sorted By Description		

Agency / Group Codes

Screen	Description
090-999 / NNN	Eligible State Employees
006 / 008	COBRA Disability Extended Participants
006 / 007	COBRA Full-time Military Participants
006 / 009	COBRA Part-time Military Participants
006 / 005	COBRA Regular Participants
007 / 004	LTD Participants & Survivors-ORP
005 / 004	LTD Participants & Survivors-VSDP
006 / 003	OHB Approved Participants
007 / 007	Retirees & Survivors-Local
007 / 008	Retirees & Survivors-ORP
005 / 002	Retirees & Survivors-VRS Disability
005 / 001	Retirees & Survivors-VRS Service
006 / 006	Survivors-No Annuity

Bill Premium Codes

DB	Screen	Description
06	06	Agency Payroll Withhold
09	09	Claims On Hold – Direct Bill Not Paid
02	02	Direct Bill – Carrier Bills Participant
07	07	DOA Pays – Line Of Duty
03	03	VRS Withhold From VRS Benefit

Medicare Codes

DB	Screen	Description
6	Y	Eligible For Medicare
7	E	Exempt From Medicare
0	N	Not Eligible For Medicare

Membership Codes

DB	Screen	Description
03	DM	Dual Minor
04	DS	Dual Spouse
01	F	Family
00	S	Single
05	W	Waived

Plan Codes-Medicare Eligible

DB	Screen	Description
27	A65	Advantage 65
37	65DV	Advantage 65/Dental/Vision
02	B1	Option I
03	B2	Option II
36	B2DV	OptionII/Dental/Vision
00	W	Waived

Plan Codes-NOT Medicare Eligible

DB	Screen	Description
42	CC0	CovaCare/Basic
44	CC2	CovaCare/Dental
43	CC1	CovaCare/OON
45	CC3	CovaCare/OON/Dental
47	CC5	CovaCare/OON/Vision/Hear/Dental
46	CC4	CovaCare/Vision/Hear/Dental
06	KP	Kaiser
00	W	Waived

Relationship Codes

DB	Screen	Description
20	D	Daughter
01	H	Husband
98	OF	Other Female Child
97	OM	Other Male Child
22	PF	Pre-Adoptive Female Child
12	PM	Pre-Adoptive Male Child
10	S	Son
21	SD	Step-Daughter
11	SS	Step-Son
02	W	Wife

Status Codes For Agencies 005-007

DB	Screen	Description
04	X	COBRA (Extended Coverage)
25	EX	Excluded Participant
32	LC	Linked Child
31	LS	Linked Spouse
27	D	LTD No Workers Comp
28	DW	LTD with Workers Comp
02	R	Retiree
33	SC	Surviving Child
34	SS	Surviving Spouse

Status Codes For Agencies 090-999

DB	Screen	Description
43	NP	NonPMIS 20+ Hour Employee
41	NQ	NonPMIS 32+ Hour Employee
01	NF	NonPMIS 40 Hour Employee
45	NE	NonPMIS Excluded Employee
46	NN	Non-PMIS LTD Working No W Comp
47	NY	Non-PMIS LTD Working with W Comp
42	PP	PMIS 20+ Hour Employee
40	PQ	PMIS 32+ Hour Employee
00	PF	PMIS 40 Hour Employee
44	PE	PMIS Excluded from coverage
29	PN	PMIS LTD Working No Workers Comp
30	PY	PMIS LTD Working with Workers Comp

REFERENCE CHARTS:

Agency / Group Codes

Screen	Description
005 / 001	Retirees & Survivors-VRS Service
005 / 002	Retirees & Survivors-VRS Disability
005 / 004	LTD Participants & Survivors-VSDP
006 / 003	OHB Approved Participants
006 / 005	COBRA Regular Participants
006 / 006	Survivors-No Annuity
006 / 007	COBRA Full-time Military Participants
006 / 008	COBRA Disability Extended Participants
006 / 009	COBRA Part-time Military Participants
007 / 004	LTD Participants & Survivors-ORP
007 / 007	Retirees & Survivors-Local
007 / 008	Retirees & Survivors-ORP
090-999 / NNN	Eligible State Employees

Bill Premium Codes

DB	Screen	Description
02	02	Direct Bill – Carrier Bills Participant
03	03	VRS Withhold From VRS Benefit
06	06	Agency Payroll Withhold
07	07	DOA Pays – Line Of Duty
09	09	Claims On Hold – Direct Bill Not Paid

Medicare Codes

DB	Screen	Description
7	E	Exempt From Medicare
0	N	Not Eligible For Medicare
6	Y	Eligible For Medicare

Membership Codes

DB	Screen	Description
03	DM	Dual Minor
04	DS	Dual Spouse
01	F	Family
00	S	Single
05	W	Waived

Plan Codes-Medicare Eligible

DB	Screen	Description
27	A65	Advantage 65
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DB	Screen	Description
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45	CC3	CovaCare/OON/Dental
46	CC4	CovaCare/Vision/Hear/Dental
47	CC5	CovaCare/OON/Vision/Hear/Dental
06	KP	Kaiser
00	W	Waived

Relationship Codes

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Status Codes For Agencies 005-007

DB	Screen	Description
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31	LS	Linked Spouse
02	R	Retiree
33	SC	Surviving Child
34	SS	Surviving Spouse
04	X	COBRA (Extended Coverage)

Status Codes For Agencies 090-999

DB	Screen	Description
45	NE	NonPMIS Excluded Employee
01	NF	NonPMIS 40 Hour Employee
46	NN	Non PMIS LTD Working No W Comp
43	NP	NonPMIS 20+ Hour Employee
41	NQ	NonPMIS 32+ Hour Employee
47	NY	Non-PMIS LTD Working with W Comp
44	PE	PMIS Excluded from coverage
00	PF	PMIS 40 Hour Employee
42	PP	PMIS 20+ Hour Employee
40	PQ	PMIS 32+ Hour Employee
29	PN	PMIS LTD Working No Workers Comp
30	PY	PMIS LTD Working with Workers Comp

REFERENCE CHARTS:

<table>
<tr><td colspan="4" align="center">Leave Codes – Page 1
Sorted By Category And Leave Code</td></tr>
<tr><td colspan="4" align="center">Layoff And Temporary Work Force Reduction</td></tr>
<tr><td><i>Code</i></td><td><i>Description</i></td><td><i>LV End Date</i></td><td><i>Automatic BES Term Date</i></td></tr>
<tr><td>20</td><td>Layoff
--Placement Only</td><td>Not to exceed 12 months</td><td>End of the month following the LV Begin Date.
If also LWP, LWP rule supercedes Layoff rule.</td></tr>
<tr><td>23</td><td>Layoff
-- Severance Only</td><td>Not to exceed 12 months
(up to 36 weeks of Severance)</td><td>End of the month following LV End Date.</td></tr>
<tr><td>21</td><td>Layoff
-- Severance & Placement</td><td>Not to exceed 12 months
(up to 36 weeks of Severance)</td><td>End of the month following LV End Date.</td></tr>
<tr><td>22</td><td>Layoff
-- Severance & Retirement</td><td>Not to exceed 12 months
(up to 36 weeks of Severance)</td><td>End of the month following LV End Date.</td></tr>
<tr><td>24</td><td>TWF --Reduced Hours</td><td>Not to exceed 12 months
(up to 690 hours)</td><td>End of the month following LV Begin Date
plus 12 months.</td></tr>
<tr><td>25</td><td>TWF --Unpaid</td><td>Not to exceed 12 months
(up to 690 hours)</td><td>End of the month following LV Begin Date
plus 12 months.</td></tr>
<tr><td colspan="4" align="center">Leave With Full Pay</td></tr>
<tr><td><i>Code</i></td><td><i>Description</i></td><td><i>LV End Date</i></td><td><i>Automatic BES Term Date</i></td></tr>
<tr><td>40</td><td>LWFP-Bone Marrow</td><td>Not to exceed 1 month</td><td>NA</td></tr>
<tr><td>02</td><td>LWFP-Educational</td><td>Not to exceed 24 months</td><td>NA</td></tr>
<tr><td>42</td><td>LWFP-Medical</td><td>Not to exceed 24 months</td><td>NA</td></tr>
<tr><td>42</td><td>LWFP-Medical with FMLA</td><td>Not to exceed 480 hours</td><td>NA</td></tr>
<tr><td>43</td><td>LWFP-Military</td><td>Not to exceed 4 months</td><td>NA</td></tr>
<tr><td>06</td><td>LWFP-Mobility Leave</td><td>Not to exceed 12 months</td><td>NA</td></tr>
<tr><td>44</td><td>LWFP-Personal</td><td>Not to exceed 4 months</td><td>NA</td></tr>
<tr><td>44</td><td>LWFP-Personal with FMLA</td><td>Not to exceed 12 weeks</td><td>NA</td></tr>
<tr><td>45</td><td>LWFP-Pre-Disciplinary</td><td>Not to exceed 80 hours</td><td>NA</td></tr>
<tr><td>46</td><td>LWFP-Pre-Layoff Leave</td><td>Not to exceed 80 hours</td><td>NA</td></tr>
<tr><td>47</td><td>LWFP-Suspension</td><td>Not to exceed 4 months</td><td>NA</td></tr>
<tr><td>48</td><td>LWFP-Workers Comp</td><td>Not to exceed 12 months</td><td>NA</td></tr>
<tr><td colspan="4" align="center">Leave With Partial Pay</td></tr>
<tr><td><i>Code</i></td><td><i>Description</i></td><td><i>LV End Date</i></td><td><i>Automatic BES Term Date</i></td></tr>
<tr><td>30</td><td>LWPP-Educational</td><td>Not to exceed 24 months</td><td>End of the month following LV End Date
not to exceed 12 months.</td></tr>
<tr><td>31</td><td>LWPP-Medical</td><td>Not to exceed 24 months</td><td>End of the month following LV End Date
not to exceed 12 months.</td></tr>
<tr><td>31</td><td>LWPP-Medical with FMLA</td><td>Not to exceed 12 weeks</td><td>End of the month following LV End Date.</td></tr>
<tr><td>32</td><td>LWPP-Personal with FMLA</td><td>Not to exceed 12 weeks</td><td>End of the month following LV End Date.</td></tr>
<tr><td>33</td><td>LWPP-Workers Comp</td><td>Not to exceed 12 months</td><td>End of the month following LV End Date.</td></tr>
<tr><td colspan="4" align="center">Leave Without Pay</td></tr>
<tr><td><i>Code</i></td><td><i>Description</i></td><td><i>LV End Date</i></td><td><i>Automatic BES Term Date</i></td></tr>
<tr><td>17</td><td>LWOP-Educational</td><td>Not to exceed 24 months</td><td>End of the month following LV End Date
not to exceed 12 months.</td></tr>
<tr><td>18</td><td>LWOP-Medical</td><td>Not to exceed 12 months,
24 months on exception</td><td>End of the month following LV End Date
not to exceed 12 months.</td></tr>
<tr><td>18</td><td>LWOP-Medical with FMLA</td><td>Not to exceed 12 weeks</td><td>End of the month following LV End Date.</td></tr>
<tr><td>05</td><td>LWOP-Military</td><td>Not to exceed 60 months</td><td>End of the month following the LV Begin Date.
If also on Layoff, Layoff rule supercedes
LWOP rule. Eligible for 24 months COBRA
with employer contribution.</td></tr>
</table>

REFERENCE CHARTS:

Leave Codes – Page 2			
Sorted By Category And Description			

Leave Without Pay (continued)			
Code	*Description*	*LV End Date*	*Automatic BES Term Date*
09	LWOP-Personal	Not to exceed 12 months, 24 months on exception	End of the month following LV End Date not to exceed 6 months.
09	LWOP-Personal with FMLA	Not to exceed 12 weeks	End of the month following LV End Date.
16	LWOP-Suspension: Pending Investigation	Not to exceed 12 months	End of the month following LV End Date.
03	LWOP-Suspension: Violation / Standards of Conduct	Not to exceed 12 months	End of the month following LV End Date.
19	LWOP-Workers Comp	Not to exceed 12 months	End of the month following LV End Date.

Long-Term Disability			
Code	*Description*	*LV End Date*	*Automatic BES Term Date*
11	LTD-No Workers Compensation	Indefinite, not to exceed 18 months at a time	End of the month following the LV Begin Date. If also on Layoff, Layoff rule supercedes LWOP rule.
11	LTD-No Workers Compensation and FMLA	Not to exceed 12 weeks	End of the month following the LV End Date.
13	LTD-With Workers Compensation	Indefinite, not to exceed 18 months at a time	End of the month following the LV Begin Date. If also on Layoff, Layoff rule supercedes LWOP rule.
13	LTD-With Workers Compensation and FMLA	Not to exceed 12 weeks	End of the month following the LV End Date.

Long-Term Disability – Working			
Code	*Description*	*LV End Date*	*Automatic BES Term Date*
14	LTDW-No Workers Compensation	Indefinite, not to exceed 12 months at a time	NA
15	LTDW-With Workers Compensation	Indefinite, not to exceed 12 months at a time	NA

Short-Term Disability			
Code	*Description*	*LV End Date*	*Automatic BES Term Date*
10	STD-No Workers Compensation	Not to exceed 173 days	End of the month following LV Begin Date plus 173 days.
10	STD-No Workers Compensation and FMLA	Not to exceed 12 weeks	End of the month following LV Begin Date plus 173 days.
12	STD-With Workers Compensation	Not to exceed 173 days	End of the month following LV Begin Date plus 173 days.
12	STD-With Workers Compensation and FMLA	Not to exceed 12 weeks	End of the month following LV Begin Date plus 173 days.

It is important to monitor the Leave Expire Report on a regular basis and to change an employee's status timely. Failure to do so may cause an unnecessary interruption in an employee's health benefits coverage. Records not updated within 30 days of the Leave End Date will be reported by DHRM to Agency HR heads.

To view the Leave Expire Report, key PSL001, Agency Number or PSL001, Agency Number, Group Number. BES users substitute PSL002 instead of PSL001. The report displays records with a leave end date that has expired or will expire within the next 45 days. The oldest leave end date is at the top of the report. All records displayed require a follow-up action that changes the employee's status or updates the leave end date.

Key follow-up actions prior to the leave end date and at least 4 business days prior to the BES term date to assure uninterrupted health benefits coverage. Health benefits are not affected if the BES term date is blank or displays « No benefits. ». A successful PSE003 transaction will automatically update The Leave Expire Report and the BES record.

REFERENCE CHARTS:

	Leave Codes – Page 1		
	Sorted By Leave Code		
Code	*Description*	*LV End Date*	*Automatic BES Term Date*
02	LWFP-Educational	Not to exceed 24 months	NA
03	LWOP-Suspension: Violation / Standards of Conduct	Not to exceed 12 months	End of the month following LV End Date.
05	LWOP-Military	Not to exceed 60 months	End of the month following the LV Begin Date. If also on Layoff, Layoff rule supercedes LWOP rule. Eligible for 24 months COBRA with employer contribution.
06	LWFP-Mobility Leave	Not to exceed 12 months	NA
09	LWOP-Personal	Not to exceed 12 months, 24 months on exception	End of the month following LV End Date not to exceed 6 months.
09	LWOP-Personal with FMLA	Not to exceed 12 weeks	End of the month following LV End Date.
10	STD-No Workers Compensation	Not to exceed 173 days	End of the month following LV Begin Date plus 173 days.
10	STD-No Workers Compensation and FMLA	Not to exceed 12 weeks	End of the month following LV Begin Date plus 173 days.
11	LTD-No Workers Compensation	Indefinite, not to exceed 18 months at a time	End of the month following the LV Begin Date. If also on Layoff, Layoff rule supercedes LWOP rule.
11	LTD-No Workers Compensation and FMLA	Not to exceed 12 weeks	End of the month following the LV End Date.
12	STD-With Workers Compensation	Not to exceed 173 days	End of the month following LV Begin Date plus 173 days.
12	STD-With Workers Compensation and FMLA	Not to exceed 12 weeks	End of the month following LV Begin Date plus 173 days.
13	LTD-With Workers Compensation	Indefinite, not to exceed 18 months at a time	End of the month following the LV Begin Date. If also on Layoff, Layoff rule supercedes LWOP rule.
13	LTD-With Workers Compensation and FMLA	Not to exceed 12 weeks	End of the month following the LV End Date.
14	LTDW-No Workers Compensation	Indefinite, not to exceed 12 months at a time	NA
15	LTDW-With Workers Compensation	Indefinite, not to exceed 12 months at a time	NA
16	LWOP-Suspension: Pending Investigation	Not to exceed 12 months	End of the month following LV End Date.
17	LWOP-Educational	Not to exceed 24 months	End of the month following LV End Date not to exceed 12 months.
18	LWOP-Medical	Not to exceed 12 months, 24 months on exception	End of the month following LV End Date not to exceed 12 months.
18	LWOP-Medical with FMLA	Not to exceed 12 weeks	End of the month following LV End Date.
19	LWOP-Workers Comp	Not to exceed 12 months	End of the month following LV End Date.
20	Layoff--Placement Only	Not to exceed 12 months	End of the month following the LV Begin Date. If also LWP, LWP rule supercedes Layoff rule.
21	Layoff--Severance & Placement	Not to exceed 12 months (up to 36 weeks of Severance)	End of the month following LV End Date.
22	Layoff--Severance & Retirement	Not to exceed 12 months (up to 36 weeks of Severance)	End of the month following LV End Date.
23	Layoff-Severance Only	Not to exceed 12 months (up to 36 weeks of Severance)	End of the month following LV End Date.
24	Temporary Work Force Reduction--Reduced Hours	Not to exceed 12 months (up to 690 hours)	End of the month following LV Begin Date plus 12 months.

REFERENCE CHARTS:

Leave Codes – Page 2 Sorted By Leave Code			
Code	Description	LV End Date	Automatic BES Term Date
25	Temporary Work Force Reduction--Unpaid	Not to exceed 12 months (up to 690 hours)	End of the month following LV Begin Date plus 12 months.
30	LWPP-Educational	Not to exceed 24 months	End of the month following LV End Date not to exceed 12 months.
31	LWPP-Medical	Not to exceed 24 months	End of the month following LV End Date not to exceed 12 months.
31	LWPP-Medical with FMLA	Not to exceed 12 weeks	End of the month following LV End Date.
32	LWPP-Personal with FMLA	Not to exceed 12 weeks	End of the month following LV End Date.
33	LWPP-Workers Comp	Not to exceed 12 months	End of the month following LV End Date.
40	LWFP-Bone Marrow	Not to exceed 1 month	NA
42	LWFP-Medical	Not to exceed 24 months	NA
42	LWFP-Medical with FMLA	Not to exceed 480 hours	NA
43	LWFP-Military	Not to exceed 4 months	NA
44	LWFP-Personal	Not to exceed 4 months	NA
44	LWFP-Personal with FMLA	Not to exceed 12 weeks	NA
45	LWFP-Pre-Disciplinary	Not to exceed 80 hours	NA
46	LWFP-Pre-Layoff Leave	Not to exceed 80 hours	NA
47	LWFP-Suspension	Not to exceed 4 months	NA
48	LWFP-Workers Comp	Not to exceed 12 months	NA

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Reason Codes And Rules Matrix – Page 1
Sorted By Reason Code

Note: The following reason codes are disabled:
04, 11, 12, 14, 16, 21, 22, 23, 24, 26, 30, 31, 32, 33, 34, 35, 36, 39, 40, 43, 46, 47, 51, 52, 55, 58, 59, 60, 74.

Changes

RC	Short Name	Trans Agy 005-007	Trans Agy 090-999	Rec Dte	Event Date	Hlth Eff Dte	Dep Del Dte	Flex Eff Dte	Plan	Mbrshp	MRA	DCA
01	Newly Elig Enrl	301	301/200	N	eligibility begin date	G	-	G	C	I	- - - -	E
03	Switch Mcare Pln	301	-	N	same as receive date	B	-	-	C	- - -	- - - -	- - - -
05	Mve I/O SrvArea	301	301	N	date of move	B	-	-	C W	I W	- - - -	- - - -
07	Marriage	301	301/200	N	marriage date	B	-	B	C	I	E1 D I T	E D I T
08	Death of Sp	301	301/200	N	death date	L	A	B	C	D	D	E D I T
09	Lost MCare/Caid	301	301/200	N	last date of coverage	B	-	B	C	I	E1 I T	- - - -
10	Divorce	301	301/200	N	date signed by judge	L	A	B	C	D	E1 D I T	E D I T
13	Lost ER Pln-S/C	301	301/200	N	last date of eligibility	B	-	B	C	I	E1 I	D T
15	Birth/Adoption	301	301/200	N	birth date	C	-	B	C	I	E1 I	E I
17	Death of Ch	301	301/200	N	death date	L	A	B	C	D	D T	D T
18	Unspec-Rmve Dep	301	-	N	same as receive date	B	A	-	D	- - - -	- - - -
19	Add-Exst Family	301	301	N	same as Receive Date	L	-	-	- -	- - -	- - - -	- - - -
25	MRA Wait Satsfd	-	200	N	BES Begin. date + 6 mo.	-	-	B	- -	- - -	E1	- - - -
28	Elig ER Pln-S/C	301	301/200	N	eligibility begin date	B	A	B	C W	D W	D T	E D I T
38	Ch Ceases Elig	301	301/200	N	last date of coverage	L	A	B	C	D	D I	D
49	Unpd LV Bgn-EE	-	301/200	N	first date of leave	B	A	B	C W	D W	D T	D T
50	Unpd LV End-EE	-	301/200	N	last date of leave	B	-	B	C	I	E1 I	E I
56	Open Enrollment	301	301/200	N	same as receive date	H	A	H	C W	D I W	E1	E
61	DayCare Chg	-	200	N	date of change	-	-	B	- -	- - -	- - - -	E D I T
62	OE/SChg-othr ER	301	301	N	date of plan change	B	A	-	C W	D I W	- - - -	- - - -
63	Unpd LV End-Sp	301	301/200	N	last date of leave	B	A	B	C W	D W	D I	E D I T
64	Unpd LV Bgn-Sp	301	301/200	N	first date of leave	B	-	B	C	I	E1 I	D T
66	Elig-MCare/Caid	301	301/200	N	eligibility begin date	B	A	B	C	D	D I	- - - -
67	J/D/Odr-Rmve Ch	301	301/200	N	date required to cover	B	A	B	C W	D W	D	- - - -
70	HIPAA Spcl Enrl	301	301	N	last date of coverage	B	-	-	C	I	- - - -	- - - -
71	J/D/Odr-Add Ch	301	301/200	N	date coverage begins	B	-	B	C	I	E1 I	- - - -
72	Prmnt Custody	301	301/200	N	custody date	B	-	B	C	I	E1 I	E I
76	Lost GovSpr Pln	301	301	N	last date of coverage	B	-	-	C	I	- - - -	- - - -
77	Chg FT to PT-EE	-	301	N	last day as FT	B	A	-	C W	D W	- - - -	- - - -
78	Chg PT to FT-EE	-	301	N	last day as PT	B	-	-	C	I	- - - -	- - - -

Other Administrative Transactions

RC	Short Name	Trans Agy 005-007	Trans Agy 090-999	Rec Dte	Event Date	Hlth Eff Dte	Dep Del Dte	Flex Eff Dte	Plan	Mbrshp	MRA	DCA
-	Create Record	000	000	N	date eligible	G	-	-	- -	- - -	- - - -	- - - -
-	Rmve Suspense	117	117	-	-	-	-	-	- -	- - -	- - - -	- - - -
-	Rmve Term Date	116	116	-	-	-	-	-	- -	- - -	- - - -	- - - -
06	Upd Prem Code	301	-	N	end of mo. for old code	L	-	-	- -	- - -	- - - -	- - - -
37	Upd E-mail	301	301	-	-	-	-	-	- -	- - -	- - - -	- - - -
57	Upd Prsnl Info	000/301	000/301	N	date of new info	D	-	-	- -	- - -	- - - -	- - - -
75	Upd N-PMIS LV	-	301	-	date leave begins	-	-	-	- -	- - -	- - - -	- - - -

REFERENCE CHARTS:

Reason Codes And Rules Matrix – Page 2
Sorted By Reason Code

Terminate Coverage

RC	Short Name	Trans Agy 005-007	Trans Agy 090-999	Rec Dte	Event Date	Hlth Eff Dte	Dep Del Dte	Flex Eff Dte	Plan	Mbrshp	MRA	DCA
27	Trm-Not Elig	301	301	N	date eligibility lost	L	A	A	- -	- - -	- - - -	- - - -
29	Trm-Death - PAR	301	-	N	death date	L	A	-	- -	- - -	- - - -	- - - -
41	Trm-Par Request	301	-	N	same as receive date	B	A	-	- -	- - -	- - - -	- - - -
65	Trm-Death - EE	-	301	N	death date	F	A	A	- -	- - -	- - - -	- - - -
68	Trm-Prem Not Pd	301	301	N	last date paid in full	L	A	A	- -	- - -	- - - -	- - - -

Transfer Coverage

RC	Short Name	Trans Agy 005-007	Trans Agy 090-999	Rec Dte	Event Date	Hlth Eff Dte	Dep Del Dte	Flex Eff Dte	Plan	Mbrshp	MRA	DCA
45	Trnsfr-COBRA	109&301	109&301	N	BES term date	L	A	-	C	D	- - - -	- - - -
48	Trnsfr-Retiremt	109&301	109&301	N	BES term date	L	A	-	C	D IS	- - - -	- - - -
53	Trnsfr-Splt Cnt	109&301	109&301	N	BES term date	L	-	-	C -	I	- - - -	- - - -
54	Trnsfr-LTD	-	109&301	N	BES term date	L	A	-	C W	D IS W	- - - -	- - - -
69	Trnsfr-Sp Pln	109&301	109&301	N	date own coverage ends	L	-	-	- W1	W1	- - - -	- - - -
73	Trnsfr-Survivor	109&301	109&301	N	BES delete date	M	-	-	C	I	- - - -	- - - -

Key To Matrix Codes

Plan:	C	Change to any valid plan based on Medicare eligibility; Matrix code must be W to Waive
	W	Waive from any valid plan if Agy is 090--999, or if Agy/Grp is 005/004 or 007/004
	W1	Waive from any valid plan if ID is found covered as a dependent and Agy/Grp is 005/001, 005/002, 007/007, or 007/008
Membership:	D	Decrease to Dual or Single; Split contract required for Medicare-eligible with 1 dependent
	I	Increase to Single, Dual or Family, if already Family allow dependents to be added; Split contract required for Medicare-eligible with 1 dependent
	IS	Increase to Single
	W	Waive from any valid membership if Agy is 090--999, or if Agy/Grp is 005/004 or 007/004
	W1	Waive from any valid membership if ID is found covered as a dependent and Agy/Grp is 005/001, 005/002, 007/007, 007/008, or 006/003
Flex Accounts:	E	Enroll in any valid amount
	E1	Enroll in any valid amount if 6 month wait is satisfied
	D	Decrease from previous amount >0 to any valid amount
	I	Increase from previous amount >0 to any valid amount
	T	Decrease previous amount >0 to 0
Dates:		See Separate Reference Chart For Translation Of Matrix Codes For Dates

REFERENCE CHARTS:

<table>
<tr><td colspan="13">Reason Codes And Rules Matrix – Page 1
Sorted By Short Name</td></tr>
<tr><td colspan="13">Note: The following reason codes are disabled:
04, 11, 12, 14, 16, 21, 22, 23, 24, 26, 30, 31, 32, 33, 34, 35, 36, 39, 40, 43, 46, 47, 51, 52, 55, 58, 59, 60, 74.</td></tr>
<tr><td colspan="13">Changes</td></tr>
<tr>
<th>RC</th><th>Short Name</th><th>Trans Agy 005-007</th><th>Trans Agy 090-999</th><th>Rec Dte</th><th>Event Date</th><th>Hlth Eff Dte</th><th>Dep Del Dte</th><th>Flex Eff Dte</th><th>Plan</th><th>Mbrshp</th><th>MRA</th><th>DCA</th>
</tr>
<tr><td>19</td><td>Add-Exst Family</td><td>301</td><td>301</td><td>N</td><td>same as Receive Date</td><td>L</td><td>-</td><td>-</td><td>- -</td><td>- - -</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>15</td><td>Birth/Adoption</td><td>301</td><td>301/200</td><td>N</td><td>birth date</td><td>C</td><td>-</td><td>B</td><td>C</td><td>I</td><td>E1 I</td><td>E I</td></tr>
<tr><td>38</td><td>Ch Ceases Elig</td><td>301</td><td>301/200</td><td>N</td><td>last date of coverage</td><td>L</td><td>A</td><td>B</td><td>C</td><td>D</td><td>D I</td><td>D</td></tr>
<tr><td>77</td><td>Chg FT to PT-EE</td><td>-</td><td>301</td><td>N</td><td>last day as FT</td><td>B</td><td>A</td><td>-</td><td>C W</td><td>D W</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>78</td><td>Chg PT to FT-EE</td><td>-</td><td>301</td><td>N</td><td>last day as PT</td><td>B</td><td>-</td><td>-</td><td>C</td><td>I</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>61</td><td>DayCare Chg</td><td>-</td><td>200</td><td>N</td><td>date of change</td><td>-</td><td>-</td><td>B</td><td>- -</td><td>- - -</td><td>- - - -</td><td>E D I T</td></tr>
<tr><td>17</td><td>Death of Ch</td><td>301</td><td>301/200</td><td>N</td><td>death date</td><td>L</td><td>A</td><td>B</td><td>C</td><td>D</td><td>D T</td><td>D T</td></tr>
<tr><td>08</td><td>Death of Sp</td><td>301</td><td>301/200</td><td>N</td><td>death date</td><td>L</td><td>A</td><td>B</td><td>C</td><td>D</td><td>D</td><td>E D I T</td></tr>
<tr><td>10</td><td>Divorce</td><td>301</td><td>301/200</td><td>N</td><td>date signed by judge</td><td>L</td><td>A</td><td>B</td><td>C</td><td>D</td><td>E1 D I T</td><td>E D I T</td></tr>
<tr><td>28</td><td>Elig ER Pln-S/C</td><td>301</td><td>301/200</td><td>N</td><td>eligibility begin date</td><td>B</td><td>A</td><td>B</td><td>C W</td><td>D W</td><td>D T</td><td>E D I T</td></tr>
<tr><td>66</td><td>Elig-MCare/Caid</td><td>301</td><td>301/200</td><td>N</td><td>eligibility begin date</td><td>B</td><td>A</td><td>B</td><td>C</td><td>D</td><td>D I</td><td>- - - -</td></tr>
<tr><td>70</td><td>HIPAA Spcl Enrl</td><td>301</td><td>301</td><td>N</td><td>last date of coverage</td><td>B</td><td>-</td><td>-</td><td>C</td><td>I</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>71</td><td>J/D/Odr-Add Ch</td><td>301</td><td>301/200</td><td>N</td><td>date coverage begins</td><td>B</td><td>-</td><td>B</td><td>C</td><td>I</td><td>E1 I</td><td>- - - -</td></tr>
<tr><td>67</td><td>J/D/Odr-Rmve Ch</td><td>301</td><td>301/200</td><td>N</td><td>date required to cover</td><td>B</td><td>A</td><td>B</td><td>C W</td><td>D W</td><td>D</td><td>- - - -</td></tr>
<tr><td>13</td><td>Lost ER Pln-S/C</td><td>301</td><td>301/200</td><td>N</td><td>last date of eligibility</td><td>B</td><td>-</td><td>B</td><td>C</td><td>I</td><td>E1 I</td><td>D T</td></tr>
<tr><td>76</td><td>Lost GovSpr Pln</td><td>301</td><td>301</td><td>N</td><td>last date of coverage</td><td>B</td><td>-</td><td>-</td><td>C</td><td>I</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>09</td><td>Lost MCare/Caid</td><td>301</td><td>301/200</td><td>N</td><td>last date of coverage</td><td>B</td><td>-</td><td>B</td><td>C</td><td>I</td><td>E1 I T</td><td>- - - -</td></tr>
<tr><td>07</td><td>Marriage</td><td>301</td><td>301/200</td><td>N</td><td>marriage date</td><td>B</td><td>-</td><td>B</td><td>C</td><td>I</td><td>E1 D I T</td><td>E D I T</td></tr>
<tr><td>25</td><td>MRA Wait Satsfd</td><td>-</td><td>200</td><td>N</td><td>BES Begin. date + 6 mo.</td><td>-</td><td>-</td><td>B</td><td>- -</td><td>- - -</td><td>E1</td><td>- - - -</td></tr>
<tr><td>05</td><td>Mve I/O SrvArea</td><td>301</td><td>301</td><td>N</td><td>date of move</td><td>B</td><td>-</td><td>-</td><td>C W</td><td>I W</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>01</td><td>Newly Elig Enrl</td><td>301</td><td>301/200</td><td>N</td><td>eligibility begin date</td><td>G</td><td>-</td><td>G</td><td>C</td><td>I</td><td>- - - -</td><td>E</td></tr>
<tr><td>62</td><td>OE/SChg-othr ER</td><td>301</td><td>301</td><td>N</td><td>date of plan change</td><td>B</td><td>A</td><td>-</td><td>C W</td><td>D I W</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>56</td><td>Open Enrollment</td><td>301</td><td>301/200</td><td>N</td><td>same as receive date</td><td>H</td><td>A</td><td>H</td><td>C W</td><td>D I W</td><td>E1</td><td>E</td></tr>
<tr><td>72</td><td>Prmnt Custody</td><td>301</td><td>301/200</td><td>N</td><td>custody date</td><td>B</td><td>-</td><td>B</td><td>C</td><td>I</td><td>E1 I</td><td>E I</td></tr>
<tr><td>03</td><td>Switch Mcare Pln</td><td>301</td><td>-</td><td>N</td><td>same as receive date</td><td>B</td><td>-</td><td>-</td><td>C</td><td>- - -</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>49</td><td>Unpd LV Bgn-EE</td><td>-</td><td>301/200</td><td>N</td><td>first date of leave</td><td>B</td><td>A</td><td>B</td><td>C W</td><td>D W</td><td>D T</td><td>D T</td></tr>
<tr><td>64</td><td>Unpd LV Bgn-Sp</td><td>301</td><td>301/200</td><td>N</td><td>first date of leave</td><td>B</td><td>-</td><td>B</td><td>C</td><td>I</td><td>E1 I</td><td>D T</td></tr>
<tr><td>50</td><td>Unpd LV End-EE</td><td>-</td><td>301/200</td><td>N</td><td>last date of leave</td><td>B</td><td>-</td><td>B</td><td>C</td><td>I</td><td>E1 I</td><td>E I</td></tr>
<tr><td>63</td><td>Unpd LV End-Sp</td><td>301</td><td>301/200</td><td>N</td><td>last date of leave</td><td>B</td><td>A</td><td>B</td><td>C W</td><td>D W</td><td>D I</td><td>E D I T</td></tr>
<tr><td>18</td><td>Unspec-Rmve Dep</td><td>301</td><td>-</td><td>N</td><td>same as receive date</td><td>B</td><td>A</td><td>-</td><td>- -</td><td>D</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td colspan="13">Other Administrative Transactions</td></tr>
<tr>
<th>RC</th><th>Short Name</th><th>Trans Agy 005-007</th><th>Trans Agy 090-999</th><th>Rec Dte</th><th>Event Date</th><th>Hlth Eff Dte</th><th>Dep Del Dte</th><th>Flex Eff Dte</th><th>Plan</th><th>Mbrshp</th><th>MRA</th><th>DCA</th>
</tr>
<tr><td>-</td><td>Create Record</td><td>000</td><td>000</td><td>N</td><td>date eligible</td><td>G</td><td>-</td><td>-</td><td>- -</td><td>- - -</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>-</td><td>Rmve Suspense</td><td>117</td><td>117</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>- -</td><td>- - -</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>-</td><td>Rmve Term Date</td><td>116</td><td>116</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>- -</td><td>- - -</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>37</td><td>Upd E-mail</td><td>301</td><td>301</td><td>-</td><td>-</td><td>-</td><td>-</td><td>-</td><td>- -</td><td>- - -</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>75</td><td>Upd N-PMIS LV</td><td>-</td><td>301</td><td>-</td><td>date leave begins</td><td>-</td><td>-</td><td>-</td><td>- -</td><td>- - -</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>06</td><td>Upd Prem Code</td><td>301</td><td>-</td><td>N</td><td>end of mo. for old code</td><td>L</td><td>-</td><td>-</td><td>- -</td><td>- - -</td><td>- - - -</td><td>- - - -</td></tr>
<tr><td>57</td><td>Upd Prsnl Info</td><td>000/301</td><td>000/301</td><td>N</td><td>date of new info</td><td>D</td><td>-</td><td>-</td><td>- -</td><td>- - -</td><td>- - - -</td><td>- - - -</td></tr>
</table>

Reason Codes And Rules Matrix – Page 2												
Sorted By Short Name												
Terminate Coverage												
RC	Short Name	Trans Agy 005-007	Trans Agy 090-999	Rec Dte	Event Date	Hlth Eff Dte	Dep Del Dte	Flex Eff Dte	Plan	Mbrshp	MRA	DCA
65	Trm-Death - EE	-	301	N	death date	F	A	A	- -	- - -	- - - -	- - - -
29	Trm-Death - PAR	301	-	N	death date	L	A	-	- -	- - -	- - - -	- - - -
27	Trm-Not Elig	301	301	N	date eligibility lost	L	A	A	- -	- - -	- - - -	- - - -
41	Trm-Par Request	301	-	N	same as receive date	B	A	-	- -	- - -	- - - -	- - - -
68	Trm-Prem Not Pd	301	301	N	last date paid in full	L	A	A	- -	- - -	- - - -	- - - -
Transfer Coverage												
RC	Short Name	Trans Agy 005-007	Trans Agy 090-999	Rec Dte	Event Date	Hlth Eff Dte	Dep Del Dte	Flex Eff Dte	Plan	Mbrshp	MRA	DCA
45	Trnsfr-COBRA	109&301	109&301	N	BES term date	L	A	-	C	D	- - - -	- - - -
54	Trnsfr-LTD	-	109&301	N	BES term date	L	A	-	C W	D IS W	- - - -	- - - -
48	Trnsfr-Retiremt	109&301	109&301	N	BES term date	L	A	-	C	D IS	- - - -	- - - -
69	Trnsfr-Sp Pln	109&301	109&301	N	date own coverage ends	L	-	-	- W1	W1	- - - -	- - - -
53	Trnsfr-Splt Cnt	109&301	109&301	N	BES term date	L	-	-	C -	I	- - - -	- - - -
73	Trnsfr-Survivor	109&301	109&301	N	BES delete date	M	-	-	C	I	- - - -	- - - -

Key To Matrix Codes

Plan:
C	Change to any valid plan based on Medicare eligibility; Matrix code must be W to Waive
W	Waive from any valid plan if Agy is 090--999, or if Agy/Grp is 005/004 or 007/004
W1	Waive from any valid plan if ID is found covered as a dependent and Agy/Grp is 005/001, 005/002, 007/007, or 007/008

Membership:
D	Decrease to Dual or Single; Split contract required for Medicare-eligible with 1 dependent
I	Increase to Single, Dual or Family, if already Family allow dependents to be added; Split contract required for Medicare-eligible with 1 dependent
IS	Increase to Single
W	Waive from any valid membership if Agy is 090--999, or if Agy/Grp is 005/004 or 007/004
W1	Waive from any valid membership if ID is found covered as a dependent and Agy/Grp is 005/001, 005/002, 007/007, 007/008, or 006/003

Flex Accounts:
E	Enroll in any valid amount
E1	Enroll in any valid amount if 6 month wait is satisfied
D	Decrease from previous amount >0 to any valid amount
I	Increase from previous amount >0 to any valid amount
T	Decrease previous amount >0 to 0

Dates: See Separate Reference Chart For Translation Of Matrix Codes For Dates

REFERENCE CHARTS:

Translation of Matrix Codes For Dates	
Code	Description
A	The Term Date/Delete Date must be the day before the Effective Date. If not, the transaction errors.

B	The Effective Date is the first of the month following the Receive Date.
	    If the Receive Date is the first of the month following the Event Date,
	        the Effective Date is the same as the Receive Date.
	    If the Receive Date is prior to the Event Date (which is not the first of a month),
	        the Effective Date is the first of the month following the Event Date.
	    If the Receive Date is prior to the Event Date (which is the first of a month),
	        the Effective Date is the same as the Event Date.
	    If the Receive Date is more than 31 days after the Event Date, the transaction errors.

C	The Effective Date is the first of the month of the Event Date. If the Receive Date is more than 31 days after the Event Date, the transaction errors.

D	The Effective Date is the first of the Current Month if there is no suspense record.
	    If there is a suspense record for the first of the next month,
	        the Effective Date is the same as the Effective Date of the suspense record.
	    If the suspense record is greater than the first of the next month , the transaction errors.

E	The Effective Date is the same as the Event Date (which must be the BES Begin Date plus 6 months). If the Receive Date is the same as or after the Event Date, the transaction errors.

F	The Effective Date is the first of the second month following the Event Date.
	    If Single or Waive membership, the Effective Date is the first of the month following the Event Date.
	    If the Receive Date is prior to the Event Date or more than 31 days after the Event Date,
	        the transaction errors.

G	The Effective Date is the first of the month following the Receive Date.
	     If the Receive Date is the first of the month following the Event Date,
	        the Effective Date is same as the Receive Date.
	    If the Receive Date and the Event Date are the first of the month,
	         the Effective Date is the same as the Event Date.
	    If the Receive Date and the Event Date are the first working day of the month,
	        the Effective Date is the first of the month of the Event Date.
	    If the Receive Date is prior to the Event Date (which is not the first of a month),
	        the Effecitve Date is the first of the month following the Event Date.
	    If the Receive Date is more than 31 days after the Event Date, the transaction errors.

H	The Effective Date is 07/01/XXXX. If the Receive Date is outside the pre-defined range, the transaction errors.
I	No longer used.
J	The Effective Date is any valid date set by the Office of Health Benefits.
K	No longer used.
L	The Effective Date is the first of the month following the Event Date. If the Receive Date is more than 31 days after the Event Date, the transaction errors.
M	The Effective Date is the first of the month following the Event Date. If the Receive Date is more than 60 days after the Event Date, the transaction errors.
N	The Receive Date must be prior to or the same as the Current Date.

REFERENCE CHARTS:

	Translation of Reason Code Short Names
	Sorted By Reason Code

Note: The following reason codes are disabled:
04, 11, 12, 14, 16, 21, 22, 23, 24, 26, 30, 31, 32, 33, 34, 35, 36, 39, 40, 43, 46, 47, 51, 52, 55, 58, 59, 60, 74.

RC	Short Name	Description
01	Newly Elig Enrl	Newly Eligible Enrollment
03	Switch Mcare Pln	Switch Medicare Plan
05	Mve I/O SrvArea	Moved Into Or Out Of A Health Plan's Service Area
06	Upd Prem Code	Update Premium Code
07	Marriage	Marriage
08	Death of Sp	Death Of Spouse
09	Lost MCare/Caid	Lost Medicare Or Medicaid
10	Divorce	Divorce
13	Lost ER Pln-S/C	Lost Employer Eligibility (Spouse or Child)
15	Birth/Adoption	Birth or Adoption
17	Death of Ch	Death Of Child
18	Unspec-Rmve Dep	Unspecified – Remove Family Member On Request
19	Add-Exst Family	Add To Existing Family Membership
25	MRA Wait Satsfd	MRA - Satisfied 6-Month Waiting Period
27	Trm-Not Elig	Term – Not Eligible
28	Elig ER Pln-S/C	Eligible For Employer's Plan (Spouse or Child)
29	Trm-Death - PAR	Term – Death Of Participant
37	Upd E-mail	Update E-mail Address
38	Ch Ceases Elig	Child Ceases To Be Eligible
41	Trm-Par Request	Term – Participant's Request
45	Trnsfr-COBRA	Transfer To COBRA
48	Trnsfr-Retiremt	Transfer To Retirement
49	Unpd LV Bgn-EE	Unpaid Leave Began For Employee
50	Unpd LV End-EE	Unpaid Leave Ended For Employee
53	Trnsfr-Splt Cnt	Transfer To Split Contract
54	Trnsfr-LTD	Transfer To Long-Term Disability
56	Open Enrollment	Open Enrollment
57	Upd Prsnl Info	Update Personal Information
61	DayCare Chg	Day Care Cost Or Coverage Change
62	OE/SChg-othr ER	Open Enrollment Or Significant Change Allowed By Other Employer
63	Unpd LV End-Sp	Unpaid Leave Ended For Spouse
64	Unpd LV Bgn-Sp	Unpaid Leave Began For Spouse
65	Trm-Death - EE	Term – Death Of Employee
66	Elig-MCare/Caid	Eligible For Medicare Or Medicaid
67	J/D/Odr-Rmve Ch	Judgment, Decree, Or Order To Remove A Child
68	Trm-Prem Not Pd	Term – Premium Not Paid
69	Trnsfr-Sp Pln	Transfer To Spouse's State Plan
70	HIPAA Spcl Enrl	HIPAA Special Enrollment
71	J/D/Odr-Add Ch	Judgment, Decree, Or Order To Add A Child
72	Prmnt Custody	Permanent Custody Of A Child
73	Trnsfr-Survivor	Transfer To Survivor
75	Upd N-PMIS LV	Update Non-PMIS Leave Information
76	Lost GovSpr Pln	Lost Another Government's-Sponsored Plan
77	Chg FT to PT-EE	Change From Full-Time To Part-Time - Employee
78	Chg PT to FT-EE	Change From Part-Time To Full-Time - Employee

REFERENCE CHARTS:

	Translation of Reason Code Short Names Sorted By Short Name	
	Note: The following reason codes are disabled: 04, 11, 12, 14, 16, 21, 22, 23, 24, 26, 30, 31, 32, 33, 34, 35, 36, 39, 40, 43, 46, 47, 51, 52, 55, 58, 59, 60, 74.	
RC	*Short Name*	*Description*
19	Add-Exst Family	Add To Existing Family Membership
15	Birth/Adoption	Birth or Adoption
38	Ch Ceases Elig	Child Ceases To Be Eligible
77	Chg FT to PT-EE	Change From Full-Time To Part-Time - Employee
78	Chg PT to FT-EE	Change From Part-Time To Full-Time - Employee
61	DayCare Chg	Day Care Cost Or Coverage Change
17	Death of Ch	Death Of Child
08	Death of Sp	Death Of Spouse
10	Divorce	Divorce
28	Elig ER Pln-S/C	Eligible For Employer's Plan (Spouse or Child)
66	Elig-MCare/Caid	Eligible For Medicare Or Medicaid
70	HIPAA Spcl Enrl	HIPAA Special Enrollment
71	J/D/Odr-Add Ch	Judgment, Decree, Or Order To Add A Child
67	J/D/Odr-Rmve Ch	Judgment, Decree, Or Order To Remove A Child
13	Lost ER Pln-S/C	Lost Employer Eligibility (Spouse or Child)
76	Lost GovSpr Pln	Lost Another Government's-Sponsored Plan
09	Lost MCare/Caid	Lost Medicare Or Medicaid
07	Marriage	Marriage
25	MRA Wait Satsfd	MRA - Satisfied 6-Month Waiting Period
05	Mve I/O SrvArea	Moved Into Or Out Of A Health Plan's Service Area
01	Newly Elig Enrl	Newly Eligible Enrollment
62	OE/SChg-othr ER	Open Enrollment Or Significant Change Allowed By Other Employer
56	Open Enrollment	Open Enrollment
72	Prmnt Custody	Permanent Custody Of A Child
03	Switch Mcare Pln	Switch Medicare Plan
65	Trm-Death - EE	Term - Death Of Employee
29	Trm-Death - PAR	Term - Death Of Participant
27	Trm-Not Elig	Term - Not Eligible
41	Trm-Par Request	Term - Participant's Request
68	Trm-Prem Not Pd	Term - Premium Not Paid
45	Trnsfr-COBRA	Transfer To COBRA
54	Trnsfr-LTD	Transfer To Long-Term Disability
48	Trnsfr-Retiremt	Transfer To Retirement
69	Trnsfr-Sp Pln	Transfer To Spouse's State Plan
53	Trnsfr-Splt Cnt	Transfer To Split Contract
73	Trnsfr-Survivor	Transfer To Survivor
49	Unpd LV Bgn-EE	Unpaid Leave Began For Employee
64	Unpd LV Bgn-Sp	Unpaid Leave Began For Spouse
50	Unpd LV End-EE	Unpaid Leave Ended For Employee
63	Unpd LV End-Sp	Unpaid Leave Ended For Spouse
18	Unspec-Rmve Dep	Unspecified – Remove Family Member On Request
37	Upd E-mail	Update E-mail Address
75	Upd N-PMIS LV	Update Non-PMIS Leave Information
06	Upd Prem Code	Update Premium Code
57	Upd Prsnl Info	Update Personal Information

REPORTS:

Reports Available To Agencies -- Page 1		
BES regularly produces the following reports. Most of these reports are available electronically from the agency's File Transfer Protocol (FTP) folder. The agency FTP folder is part of the DHRM "HuRMan File Repository". To register with DHRM for access to an agency's folder, contact the DHRM Help Desk. Once FTP folder user name and password are received, the file repository can be reached from the DHRM Home Page. Click on the "HR Information Systems" tab, and then click on the "HuRMan" tab at the top of the page. FTP folders are arranged by agency number. Scroll to the agency desired, click on it, and enter your FTP folder user name and password. A list of files in the folder will display. FTP files are listed by File Name, Agency Code, and Date suffix. Scroll to the report desired, click on it and the report opens automatically for you to view or print. If a file is missing, there was no report for that month.		
Report Code	*Report Title*	*Report Description*
PM9641-1:	**Agency Exception Report**	This report is produced in <u>April and October</u> of each year. Among other things, this identifies those employees who have a need to update their BES record. For example, temporary social security numbers are invalidated in BES after three months. BES will not allow any changes to the participant's record until a valid social security number is entered. This includes changing plans, membership or enrolling in a flexible reimbursement account. Use this report to encourage your employees to update these records.
Monthly-Enrollment-Rpt:	**Agency Monthly Enrollment Report**	This <u>monthly</u> report lists all eligible employees as of the first of each month. This report includes personal information and elections for health coverage and flexible reimbursement accounts. This report is used for information purposes only and may be downloaded into Excel to meet various agency needs.
PM4270:	**Agency Transaction Turnaround Document**	This <u>daily</u> report lists changes made in BES and it shows both the new and old data. This report includes changes made through EmployeeDirect. It is important to review and confirm that changes made are accurate. This is the official record of BES changes.
PM3841-RPT1:	**Dependent Age Termination Report**	This annual report is produced during the first part of <u>January</u>. It lists dependent children removed from BES effective the last day of the previous year because they have reached an age that makes them ineligible for coverage. For example, the dependent child who reached Age 23 during 2001 will be listed on this report in January 2002. Use this report to send a HIPAA certificate and Extended Coverage notice.

REPORTS:

	Reports Available To Agencies -- Page 2	
Report Code	*Report Title*	*Report Description*
PM9640-1:	**Dependents Approaching Eligibility Thresholds (Age 23 Report)**	This report is produced in <u>July and October</u> of each year and identifies participants who have children reaching Age 23 sometime during the current year. Note that this report does not include participants who were entered into BES after the report's run date. Use this report to notify participants that the dependent child will be terminated at the end of the year in which the child reached Age 23. Also, remember to send an Extended Coverage notice along with a HIPAA certificate to the child who lost coverage.
PM4202	**FBMC Enrollment Results**	This report is produces in June of each year and identifies participants enrolled in a flexible reimbursement account. Use this report to ensure that payroll deductions for flexible reimbursement accounts are set up on a timely basis.
PM4175:	**Participants And Dependents Removed From Active File**	This <u>monthly</u> report shows employees and/or dependents that have lost coverage from the previous month. For example, file PM4175-REP-00NNN-09022001.txt (agency code = nnn) lists those terminated from BES as of the end of August. This report can be used as a backup to insure that all appropriate Extended Coverage notices and HIPAA certificates have been sent. Remember all individuals who have their coverage terminated should be sent a HIPAA certificate even though they may not have experienced an Extended Coverage qualifying event.
PM9645-RPT4:	**Persons Eligible For Medicare In [Month]**	This <u>monthly </u>report identifies individuals in Agencies 005 - 007 that are approaching Age 65 and are currently enrolled in Non-Medicare plans. Individuals not enrolled in family membership will be automatically transferred to the State plan that supplements Medicare (currently Advantage 65) unless a different option is requested. Individuals enrolled in family membership will continue in family membership with Medicare as the primary payer unless a different option is requested. Use this report to notify the individual of available plan options and the automatic transfer. The Office of Health Benefits provides sample letters.

SPECIAL HANDLING:

Actions That Require Special Handling – Page 1	
Multiple Transactions :	Some BES actions require multiple transactions and reason codes.

For example, changes to health coverage are entered using PSB301 while changes to flexible reimbursement accounts are entered using PSB200. When multiple reason codes are required, enter a separate transaction for each reason code.

You will find the Reason Codes and Rules Matrix Reference Chart helpful in determining what actions can be accomplished by transaction and reason code. |
| **Non-PMIS Employees :** | PMIS automatically creates and updates BES records for PMIS employees. Agencies <u>not</u> using PMIS must create and keep up-to-date BES records for their non-PMIS employees to ensure eligibility for health coverage and flexible spending accounts.

For example, it is very important to create a W-Waived BES record with the correct Status for newly eligible non-PMIS employees. Use PSB000 followed by PSB301 with RC01. You will find all of the non-PMIS status codes on the Frequently Used BES Codes Reference Chart.

It is also important to update leave information for non-PMIS employees to reflect their appropriate eligibility. Use PSB301 with RC75. You will find all of the leave codes and leave rules on the Leave Codes Reference Chart. |
| **Social Security Numbers :** | BES requires a social security number to determine eligibility for health benefits. Once eligibility is validated, a separate identification number is created and used for identification purposes. This BES-generated number is printed on ID cards.

Employees without a social security number must be handled by DHRM. Contact the DHRM Help Desk for assistance.

If a dependent child's social security number is temporarily not available, enter all 999s in the social security number field. BES will assign a temporary social security for three months. After three months, BES will not allow any changes to the participant's record until a valid social security number is entered.

If a social security number for a spouse is not available or if a dependent child will not have a social security number, send the supporting documentation to Employee Services in OHB for review. If approved, a number will be created using 888s in the social security number field. Refer to the section titled "Transactions That Require The Assistance of OHB" for instructions on how to send your supporting documentation.

The Agency Exception Report lists all records missing a valid social security number for agency follow-up. Use PSB301 and reason code 57 to update a spouse or dependent child's social security number. |

SPECIAL HANDLING:

	Actions That Require Special Handling – Page 2
Split Contracts For Those Eligible For Medicare :	Becoming eligible for Medicare in the Employee Program (Agencies 090 – 999) does not require a change in health coverage. No update in BES is necessary. Becoming eligible for Medicare in the Retiree Program generally requires a change in health coverage and BES must be updated. A. Three or more persons, any of whom may be eligible for Medicare, may enroll in a health plan for those not eligible for Medicare with F-family membership. Use PSB301 and the appropriate reason code to update the Medicare eligibility field. If new to retiree program, use RC48, if already enrolled in the retiree program, use RC66. B. When two persons are covered with D-Plus One membership, and one or both become eligible for Medicare, it is necessary to change the health coverage to two S-Single memberships. Use PSB301 and RC66 to change the original participant's record and PSB109 followed by PSB301 with RC53 to transfer the dependent to their own record. <u>Be sure you TRANSMIT on both the PSB109 and the PSB301</u>. The dependent's status on the newly created record will be LS-Linked Spouse or LC-Linked Child. C. When an original participant in a S-Single membership adds a dependent not already on file in BES, and one or both are eligible for Medicare, use PSB000 followed by PSB301 and the appropriate reason code to create a record for the new member. The dependent's status on the newly created record will be LS-Linked Spouse or LC-Linked Child.
Survivor Not Previously Covered :	Most survivors are transferred using PSB109 followed by PSB301 with reason code 73. Sometimes, however, a survivor not previously covered by the deceased is eligible for health benefits coverage. In this case, confirm that the deceased's record has been terminated and use PSB000 followed by PSB301 with reason code 73 to create a record for the new participant's enrollment.

Transactions Requiring The Assistance Of OHB :	Certain requests for health benefits changes require the assistance of the Office of Health Benefits.
	
	Some examples are:
	    Agency Errors or BES Errors
	    Transactions With An Effective Date Retroactive More Than 59 Days
	    Ineligible Dependents
	    No Social Security Number for Employee or Employee's Spouse
	
	In these cases, use the "Agency Request for Assistance Form" and fax your supporting documents to (804) 371-0231 to the attention of Employee/Retiree Services or the Systems Team. The form is posted on the DHRM Web site under Resources for Benefits Administrators at www.dhrm.virginia.gov/resources/benefitsadmin/RequestForAssistanceForm.pdf.

TRANSACTIONS:

Transaction Code:	BENEFITS
Transaction Title:	PMIS Benefits Transactions
Function:	This transaction provides "quick access" to BES transactions.
Description:	A. This transaction lists all BES transactions available to users. B. Users may select a transaction directly from the list rather than returning to the home position to key the call-up transaction.
Users:	All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.
Procedure:	A. From HOME position, key: BENEFITS B. Transmit. C. BENEFIT screen returns. D. Move cursor to the space immediately following the desired transaction and Transmit. E. Some transactions may require additional data entry and another Transmit. F. Selected transaction screen returns for data entry. G. Continue per instructions for the selected transaction.

TRANSACTIONS:

Transaction Code:	PSBHLP
Transaction Title:	Benefits Help Screen 1 of 3
Function:	This transaction is used to select a value for various BES data-entry fields.
Description:	A. This transaction lists current, valid BES codes with a short description for frequently used BES data fields. B. Users may select help for a particular time period by including a desired date in the screen call-up command.
Users:	All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.
Procedure:	For Current BES Help: A. From HOME position, key: PSBHLP B. Transmit. C. PSBHLP,Current-Date screen returns. For Date-Specific BES Help: A. From HOME position, key: PSBHLP,Date B. Transmit. C. PSBHLP,Specified-Date screen returns.

TRANSACTIONS:

Transaction Code:	PSBPEN
Transaction Title:	Benefits Pending Display / Accept / Reject
Function:	This transaction is used to manage BES changes requested through EmployeeDirect because of a qualifying mid-year event.
Description:	A. This transaction is used to accept or reject a BES change requested through EmployeeDirect because of a qualifying mid-year event. B. Users may select to view a complete list of pending transactions by agency or a specific pending transaction by identification number.
Users:	All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.
Procedure:	A. From HOME position, key: PSBPEN B. Transmit. C. PSBPEN screen returns for data entry. D. Enter appropriate data items. E. Tab to XMIT and Transmit. F. PSBPEN screen listing all pending transactions returns. G. Tab to the desired pending transaction and Transmit. H. PSBPEN screen for the specific pending transaction returns. I. Continue with instructions below to accept or reject the pending transaction. For Agency-Specific List of Pending Transactions: A. From HOME position, key: PSBPEN,Agency Number B. Transmit. C. PSBPEN screen listing all pending transactions returns. D. Tab to the desired pending transaction and Transmit. E. PSBPEN screen for the specific pending transaction returns. F. Continue with instructions below to accept or reject the pending transaction. For Person-Specific Pending Transaction: A. From HOME position, key: PSBPEN,Identification Number B. Transmit. C. PSBPEN screen for the specific pending transaction returns. D. Continue with instructions below to accept or reject the pending transaction. To Accept or Reject A Pending Transaction: A. From PSBPEN screen for a specific pending transaction, verify that the change requested satisfies current benefits administration rules. B. Tab to Accept/Reject and type either Accept (A) to authorize the change, or Reject ® to delete the change. C. Transmit. D. BES will automatically display a PSB305 screen when the PSBPEN transaction is successful.

TRANSACTIONS:

Transaction Code:	PSB000
Transaction Title:	Participant Create / Participant Change
Function:	This transaction is used to manage BES data for non-PMIS participants.
Description:	A. This transaction is primarily used to create a new non-PMIS BES record. B. It also allows the following changes to a current non-PMIS participant's BES record: Social Security Number, Date of Birth, Sex, Pay Code and Agency/Group number.
Users:	All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.

Procedure:	To create a new non-PMIS BES record:
	
	A. From HOME position, key: PSB000,Identification Number
	B. Transmit.
	C. PSB000 screen returns for data entry. Re-enter the participant's identification number.
	D. Transmit.
	E. PSB101 screen returns for data entry.
	F. Enter appropriate data items.
	G. Tab to END and Transmit.
	H. A successful PSB000 will automatically return a PSB301 screen for data entry.
	I. Verify the enrollment displayed on the PSB301 and make changes if necessary.
	J. Tab to XMIT and Transmit.
	K. BES will respond with a message at the bottom of the screen.
	    The "Transaction Complete" message appears when the transaction is successful.
	    A successful PSB301 is required to complete the action.
	
	To change a current non-PMIS participant's record:
	
	A. From HOME position, key: PSB000,Identification Number
	B. Transmit.
	C. PSB104 screen returns for data entry.
	D. Enter appropriate data items.
	E. Tab to END and Transmit.
	F. BES will respond with a message at the bottom of the screen.
	    The "Transaction Complete" message appears when the transaction is successful.

TRANSACTIONS:

Transaction Code:	PSB109
Transaction Title:	Transfer And Re-enroll An Inactive Participant (one that is no longer an active employee)
Function:	This transaction is used to transfer and re-enroll a retiree, a linked spouse or linked child, a new survivor, a LTD participant, or an Extended Coverage (COBRA) participant in the appropriate BES Agency / Group.
Description:	A. This transaction allows Agency/Group transfers to Agencies 005 - 007. It also allows Agency/Group transfers between Agencies 005 - 007. B. This transaction requires that the BES record have a termination date if the transfer is a participant, or BES delete date if the transfer is a dependent. C..A successful PSB109 transfers the terminated record to the new Agency / Group and automatically displays a PSB301 screen for data entry. D. The PSB301 transaction must be successfully executed to re-enroll and activate coverage in the new Agency / Group.
Users:	All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.
Procedure:	A. From HOME position, key: PSB109,Identification Number B. Transmit. C. PSB109 screen returns for data entry. D. Verify the Social Security Number and Name of the individual about to be transferred. Cancel the transaction if it is the wrong individual. E. Verify the Effective Date and the Event Date. Contact OHB if it is not correct. F. Enter the Receive Date. G. Tab to the appropriate Agency/Group and Transmit. H. A successful PSB109 will automatically display a PSB301 screen for data entry. I. Verify the enrollment displayed on the PSB301 and make changes if necessary. J. Tab to XMIT and Transmit to complete the transfer and re-enrollment. K. BES will respond with a message at the bottom of the screen. The "Transaction Complete" message appears when the transaction is successful. A successful PSB301 is required to complete the action.

TRANSACTIONS:

Transaction Code:	PSB116
Transaction Title:	Reactivate Terminated Participant
Function:	This transaction is used to remove the term date from a participant's BES record.
Description:	A. This transaction removes the term date and reactivates a participant's record in the same Agency / Group prior to the termination. B. The Agency / Group may be changed to any valid code for which the user is authorized to update and the record will be reactivated in the new Agency / Group.
Users:	All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.
Procedure:	A. From HOME position, key: PSB116,Identification Number B. Transmit. C. PSB116 screen returns for data entry. D. Verify the Social Security Number and Name of the individual about to be reactivated. Cancel the transaction if it is the wrong individual. E. Tab to XMIT and Transmit. F. The PSB305 screen will automatically display when the transaction is successful. Verify that the information is accurate. G. Use PSB301, reason code 57, and the same Receive Date and Event Date shown on the PSB305 to correct personal information for the participant or a dependent. H. Use PSB301, reason code 27, and a term date that is one day less than the effective date shown on the PSB305 if the Agency/Group is not correct. Then, repeat the PSB116 to reactivate. I. Contact the Office of Health Benefits for assistance if the effective date shown on the PSB305 is not correct.

TRANSACTIONS:

Transaction Code:	PSB117
Transaction Title:	Benefits Suspense Delete
Function:	This transaction is used to delete a transaction on a current participant's record that has not yet become effective.
Description:	A. BES stacks successful transactions on a current participant's record by effective date and will not allow a transaction to be inserted between effective dates. B. To insert a transaction between effective dates, it is necessary to delete the suspense transaction, key the new transaction, and as needed, re-key the deleted suspense transaction. C. This transaction requires a date equal to or after the current date. All transactions with an effective date greater than the date specified will be deleted.
Users:	All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.
Procedure:	A. From HOME position, key: PSB117,Identification Number B. Transmit. C. PSB117 screen returns for verification. D. Tab to XMIT and Transmit. E. BES will respond with a message at the bottom of the screen. F. The "Transaction Complete" message appears when the transaction is successful. G. Continue per instructions for the PSB301 transaction to key the new transaction, and as needed, re-key the deleted suspense transaction.

TRANSACTIONS:

Transaction Code:	PSB200
Transaction Title:	Flexible Spending Accounts Update
Function:	This transaction is used to manage flexible spending accounts data for current BES participants.
Description:	A. This transaction is used to enroll and make changes to flexible spending accounts for current BES participants. B. This transaction requires a participant's identification number and a BES reason code. If the user fails to include a BES reason code in the call-up command, BES will present an intermediary screen from which the user may select an appropriate BES reason code.
Users:	All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.
Procedure:	A. From HOME position, key: PSB200,Identification Number,Reason Code B. Transmit. C. PSB200 screen returns for data entry. D. Enter the Event Date, Receive Date, and Per Pay Amount(s). E. Tab to XMIT and Transmit. F. BES will respond with a message at the bottom of the screen. If the transaction fails, make the correction, tab to XMIT and Transmit again. The "Transaction Complete" message appears when the transaction is successful. G. Verify that the information displayed on the PSB200 screen for each pay period accurately reflects the participant's request for change. If not, repeat the PSB200 transaction.

TRANSACTIONS:

Transaction Code:	PSB301
Transaction Title:	BES Change
Function:	This transaction is used to manage BES data for current BES participants.
Description:	A. This transaction is the most frequently used data-entry transaction in BES. It is used to enroll and make changes to a current BES record. B. This transaction requires a participant's identification number and a BES reason code. If the user fails to include a BES reason code in the call-up command, BES will present an intermediary screen from which the user may select an appropriate BES reason code.
Users:	All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.
Procedure:	A. From HOME position, key: PSB301,Identification Number,Reason Code B. Transmit. C. PSB301 screen returns for data entry. D. Enter the Receive Date, Event Date, and all other appropriate data items. E. Tab to END and Transmit. F. BES will respond with a message at the bottom of the screen if the transaction fails. If this happens, make the correction, tab to END and Transmit again. G. The PSB305 screen will automatically display when the transaction is successful. Verify that the information displayed on the PSB305 accurately reflects the participant's request for change. If not, repeat the PSB301 transaction.

TRANSACTIONS:

Transaction Code:	PSB305
Transaction Title:	Participant Data As of [Date]
Function:	This transaction is used to view BES data from the current record of a participant or dependent that has not been terminated.
Description:	A. This transaction requires the identification number or the first and last name of the participant or dependent to be displayed. B. This transaction displays BES data from a current record using several data-specific screens. The screen call-up command defaults to a primary screen that displays the most important BES data. Links at the top of the primary screen indicate and allow quick access to additional BES data on file. If a link does not appear, the data is not on file. C. Links at the top of each additional information screen allow the user to move back and forth between all data-specific screens.
Users:	All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.
Procedure:	A. From HOME position, key: PSB305,Identification Number or PSB305,Lastname,Firstname B. Transmit. C. PSB305 primary screen returns. D. For additional BES data, tab to the desired link at the top of each screen and Transmit. From a participant's primary screen: Suspense> links to a suspense record 1stDep> links to a covered dependent's record DScroll(N)> indicates the number of covered dependents and links to a list of the covered dependents LK> links to a linked participant's record From a dependent's primary screen: NxD> links to the next covered dependent's record Pr> links to the previous covered dependent's record DSc> links to a list of the covered dependents Pt> links to the corresponding participant's record From a suspense screen: Current> links to the participant's current record 1stDep> links to a covered dependent's record DSc(N)> links to a list of the covered dependents From a list of covered dependents screen: Participant> links to the corresponding participant's record From a linked participant's screen: 1stDep> links to a covered dependent's record DSc(N)> links to a list of the covered dependents Pt> links to the corresponding participant's record

TRANSACTIONS:

Transaction Code:	PSB306
Transaction Title:	Flexible Spending Accounts Display
Function:	This transaction is used to view a participant's plan year flexible spending accounts data.
Description:	A. This transaction requires the identification number of the participant to be displayed. B. This transaction displays plan year flexible spending accounts data. The screen call-up command defaults to the current plan year. To view a different plan year, change the date in the command line.
Users:	All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.
Procedure:	A. From HOME position, key: PSB306,Identification Number B. Transmit. C. PSB306 screen returns displaying the current plan year flexible spending accounts data. D. To view a different plan year, tab to the command line, change the date and Transmit. You may also call-up a PSB306 screen from the PSB305 screen. Tab to the MRA or DCA field and transmit.

TRANSACTIONS:

Transaction Code:	PSB309
Transaction Title:	Participant History Scroll
Function:	This transaction is used to view a history of all BES transactions on the record of a participant or dependent.
Description:	A. This transaction requires the identification number of the participant or dependent to be displayed. B. If the identification number has both participant and dependent records, BES will return an intermediary screen for the user to select which records are desired. C. The screen call-up command defaults to a primary screen that lists all transactions by the key-date. The oldest transaction is listed first. The transaction listed last is the current data. D. From the primary screen, users may link directly to a transaction's detailed display screen. Links on the detailed display screen allow the user to move back and forth between detailed display screens.
Users:	All BES users may use this transaction. BES will respond with a message at the bottom of the screen if user restrictions apply.
Procedure:	A. From the HOME position, key: PSB309,Identification Number B. Transmit. C. If the identification number has both participant and dependent records, BES returns an intermediary screen for the user to select which records are desired. Make a selection and Transmit. D. PSB309 primary screen returns. E. To view a transaction's detailed display screen, tab to the desired transaction and Transmit. F. PSB309 detailed display screen returns. G. To move back and forth between detailed display screens, tab to the desired link at the top of the screen and Transmit. From a participant's detailed display screen: Next> links to the next screen Prior> links to the previous screen Orig> links to the first page of the primary PSB309 screen PSc> links to the last viewed page of the primary PSB309 screen LK> links to a linked participant's detailed display record DSc(N)> indicates the number of covered dependents and links to a list of the covered dependents From a dependent's detailed display screen: Orig> links to the first page of the primary PSB309 screen PSc> links to the participant's primary PSB309 screen DSc> indicates the number of covered dependents and links to a list of the covered dependents

TERMS / DEFINITIONS:

Very Important Terms And Definitions – Page 1	
Term	*Definition*
Agency Code:	The 3-digit number that identifies the agency responsible for a BES record.
Bill Premium Code:	The 2-digit number that identifies how a participant's premium is collected.
Dependent Record:	The BES information about a spouse and/or child covered under a participant's health benefits membership.
Effective Date:	The date a BES transaction becomes effective. BES calculates the effective date for most transactions.
Event Date:	The date an event that affects one's eligibility for health benefits coverage occurs.
File Transfer Protocol (FTP) Folder:	Agency-specific folder on the HuRMan File Repository managed by DHRM.
Group Code:	The 3-digit number that identifies a specific group of participants within a responsible Agency.
Identification Number:	The BES assigned identifications number or the social security number stored in BES for a participant.
Participant Record:	The BES information about the person who qualifies for the group's health benefits coverage. A participant is usually an employee, retiree, or an extended coverage beneficiary.
PMIS Participant:	An employee eligible for health benefits and maintained on the PMIS database.
Non-PMIS Participant:	A particpant eligible for health benefits and not maintained on the PMIS database. This category includes local employees, and all participants in Agencies 005, 006, and 007.
Reason Code:	The 2-digit number that identifies why a BES change is requested. BES validates requests for change against business rules assigned to each reason code.
Receive Date:	The date a request for change in health benefits is received.
Screen Call-up Command:	Combinations of transaction code, identification number, reason code, etc. used to access a BES record.

TERMS / DEFINITIONS:

Very Important Terms And Definitions – Page 2	
Term	*Definition*
Split Contract:	A split-contract is necessary when one or both individuals in a Retiree Plus One membership become eligible for Medicare. The dependent must be terminated, transferred, and re-enrolled as a participant. Each member will have a unique Identification number and a cross-reference link. The retiree's identification number is recorded in the Orig Par field.
Status Code:	The 2-character alpha code that identifies the type of participant within a specific Group.
Suspense Transaction:	Any transaction with an effective date greater than the current date is placed in "suspense" on the participant's record. When the "suspense" effective date arrives, BES automatically transfers the transaction from suspense to current. Multiple suspense transactions with the same effective date will collapse to one suspense record for that date and the last transaction is listed as the reason for the transaction.
Transaction Code:	The 6-character alpha/numeric code that calls-up a BES screen.
User Name and Password:	Identification Name and Password assigned by DHRM for access to BES.